



ICD~10~CM Coding Training

ICD~10~CM The Basics

*For Children's Developmental Services
Agencies*





Training Objectives

1. Develop a general understanding of ICD-10-CM
 1. Why the change from ICD-9-CM to ICD-10-CM
 2. Understand the terminology, coding conventions and general coding guidelines for use of the ICD-10-CM classification system
2. Understand how to look up diagnoses in the Alphabetical Index and verify the code in the Tabular List
3. Demonstrate how to accurately assign ICD-10-CM codes to simple diagnoses
4. Ensure that local agency Implementation Team members are trained in order to conduct Clinical Documentation Assessments
5. Utilize feedback from persons trained to improve training materials for widespread training in 2014



Training Prerequisite

- This training **is** the prerequisite for all other ICD-10-CM coding training
- Portions of the information provided in the basic training may be repetitive of other training you have attended but it never hurts to reinforce key points from prior training
- **In order to complete this training, access to ICD-10-CM code book or downloads of the 2014 version of ICD-10-CM from the CDC or CMS website is needed**
 - <http://www.cms.gov/Medicare/Coding/ICD10/2014-ICD-10-CM-and-GEMs.html>
 - <http://www.cdc.gov/nchs/icd/icd10cm.htm#icd2014>



Key Points

- ICD~10 was developed by the World Health Organization (WHO)
 - On Jan 1, 1999, the US changed from ICD~9 to ICD~10 for the coding and classification of mortality data from death certificates
- The ICD~10~**CM** classification system was developed by the National Center for Health Statistics as a clinical modification to ICD~10
 - ICD~10~CM is a unique system for use in the US for morbidity and mortality reporting
 - WHO authorized the US to develop a clinical modification but modifications to ICD~10 must conform to WHO conventions for ICD~10
- Any revisions to ICD~10~CM will be made via an established update process
- All HIPAA covered entities must begin using ICD~10~CM for all clients served on or after October 1, 2014

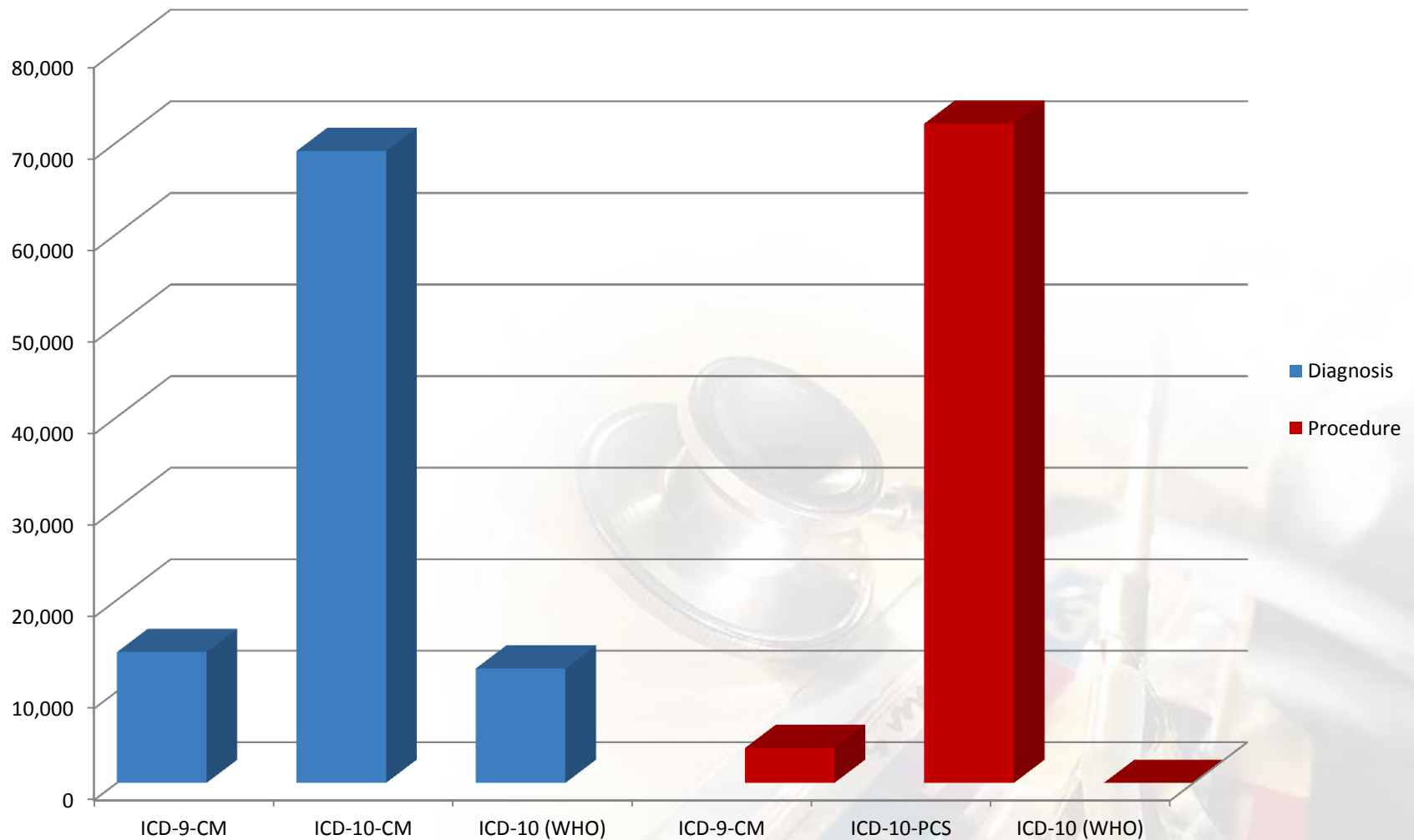


What's Changing With ICD-10-CM

ICD-9-CM	ICD-10-CM
3-5 characters	3-7 characters
1 st character numeric or alpha (E or V)	1 st character is always alpha (no 'U')
Characters 2-5 are numeric	Character 2 always numeric; Characters 3-7 can be alpha or numeric
Decimal after first 3 characters; Alpha characters not case sensitive	Decimal after first 3 characters; Alpha characters not case sensitive
377.75 – Cortical blindness	H47.611 – Cortical blindness, <u>right</u> side of brain
V54.25 – Aftercare for healing pathologic fracture of upper leg	M84.452D – Pathological fracture, <u>left</u> femur, <u>subsequent encounter</u> for fracture with routine healing
14,000 codes – not much specificity	70,000 codes – greater specificity



ICD-10-CM/PCS Growth of Codes





Format Structure of ICD~10~CM

ICD~10~CM							
Alpha	#	Alpha or #	•	Alpha or #	Alpha or #	Alpha or #	Alpha or #
Category				Etiology, Anatomic site, Severity (possibly dummy placeholder)			Extension
R12 ~ Heartburn							
Q03.0 – Malformations of aqueduct of Sylvius							
Z03.74 – Encounter for suspected problem with fetal growth ruled out							
E11.311 – Type II Diabetes Mellitus with unspecified Diabetic Retinopathy with Macular Edema							
O36.0131 – Maternal care for anti-D(Rh) antibodies, third trimester, fetus 1							
S94.11xA – Injury of medial plantar nerve, right leg, initial encounter							



Alphabetic Index— Index to Diseases and Injuries

ICD-10-CM INDEX TO DISEASES and INJURIES

[A](#) | [B](#) | [C](#) | [D](#) | [E](#) | [F](#) | [G](#) | [H](#) | [I](#) | [J](#) | [K](#) | [L](#) | [M](#) | [N](#) | [O](#) | [P](#) | [Q](#) | [R](#) | [S](#) | [T](#) | [U](#) | [V](#) | [W](#) | [X](#) | [Y](#) | [Z](#)

A

Aarskog's syndrome Q87.1

Abandonment —see Maltreatment

Abasia (-astasia) (hysterical) F44.4

Abderhalden-Kaufmann-Lignac syndrome (cystinosis) E72.04

Abdomen, abdominal —see *also* condition

- acute R10.0

- angina K55.1

- muscle deficiency syndrome Q79.4

Abdominalgia —see Pain, abdominal

Abduction contracture, hip or other joint —see Contraction, joint

Aberrant (congenital) —see *also* Malposition, congenital

- adrenal gland Q89.1

- artery (peripheral) Q27.8

- - basilar NEC Q28.1

- - cerebral Q28.3

- - coronary Q24.5

- - digestive system Q27.8

- - eye Q15.8



Alphabetic Index –Table of Neoplasms

	Malignant Primary	Malignant Secondary	Ca in situ	Benign	Uncertain Behavior	Unspecified Behavior
N						
Neoplasm, neoplastic	C80.1	C79.9	D09.9	D36.9	D48.9	D49.9
- abdomen, abdominal	C76.2	C79.8-	D09.8	D36.7	D48.7	D49.89
- - cavity	C76.2	C79.8-	D09.8	D36.7	D48.7	D49.89
- - organ	C76.2	C79.8-	D09.8	D36.7	D48.7	D49.89
- - viscera	C76.2	C79.8-	D09.8	D36.7	D48.7	D49.89
- - wall—see also <i>Neoplasm, abdomen, wall, skin</i>	C44.509	C79.2-	D04.5	D23.5	D48.5	D49.2
- - - connective tissue	C49.4	C79.8-	-	D21.4	D48.1	D49.2
- - - skin	C44.509					
- - - - basal cell carcinoma	C44.519	-	-	-	-	-
- - - - specified type NEC	C44.599	-	-	-	-	-
- - - - squamous cell carcinoma	C44.529	-	-	-	-	-
- abdominopelvic	C76.8	C79.8-	-	D36.7	D48.7	D49.89
- accessory sinus—see <i>Neoplasm, sinus</i>						
- acoustic nerve	C72.4-	C79.49	-	D33.3	D43.3	D49.7
- adenoid(pharynx) (tissue)	C11.1	C79.89	D00.08	D10.6	D37.05	D49.0
- adipose tissue—see also <i>Neoplasm, connective tissue</i>	C49.4	C79.89	-	D21.9	D48.1	D49.2



Alphabetic Index –Table of Drugs and Chemicals

ICD-10-CM TABLE of DRUGS and CHEMICALS

| [A](#) | [B](#) | [C](#) | [D](#) | [E](#) | [F](#) | [G](#) | [H](#) | [I](#) | [J](#) | [K](#) | [L](#) | [M](#) | [N](#) | [O](#) | [P](#) | [Q](#) | [R](#) | [S](#) | [T](#) | [U](#) | [V](#) | [W](#) | [X](#) | [Y](#) | [Z](#)

Substance	Poisoning, Accidental (unintentional)	Poisoning, Intentional self-harm	Poisoning, Assault	Poisoning, Undetermined	Adverse effect	Underdosing
#						
1-propanol	T51.3X1	T51.3X2	T51.3X3	T51.3X4	--	--
2-propanol	T51.2X1	T51.2X2	T51.2X3	T51.2X4	--	--
2,4-D(dichlorophen-oxyacetic acid)	T60.3X1	T60.3X2	T60.3X3	T60.3X4	--	--
2,4-toluene diisocyanate	T65.0X1	T65.0X2	T65.0X3	T65.0X4	--	--
2,4,5-T(trichloro-phenoxyacetic acid)	T60.1X1	T60.1X2	T60.1X3	T60.1X4	--	--
14-hydroxydihydro-morphinone	T40.2X1	T40.2X2	T40.2X3	T40.2X4	T40.2X5	T40.2X6
A						
ABOB	T37.5X1	T37.5X2	T37.5X3	T37.5X4	T37.5X5	T37.5X6
Abrine	T62.2X1	T62.2X2	T62.2X3	T62.2X4	--	--
Abrus(seed)	T62.2X1	T62.2X2	T62.2X3	T62.2X4	--	--
Absinthe	T51.0X1	T51.0X2	T51.0X3	T51.0X4	--	--
- beverage	T51.0X1	T51.0X2	T51.0X3	T51.0X4	--	--
Acaricide	T60.8X1	T60.8X2	T60.8X3	T60.8X4	--	--
Acebutolol	T44.7X1	T44.7X2	T44.7X3	T44.7X4	T44.7X5	T44.7X6



Alphabetic Index ~ Index to External Cause of Injuries

ICD-10-CM External Cause of Injuries Index

[A](#) | [B](#) | [C](#) | [D](#) | [E](#) | [F](#) | [G](#) | [H](#) | [I](#) | [J](#) | [K](#) | [L](#) | [M](#) | [N](#) | [O](#) | [P](#) | [R](#) | [S](#) | [T](#) | [U](#) | [V](#) | [W](#)

A

Abandonment (causing exposure to weather conditions) (with intent to injure or kill) NEC X58

Abuse (adult) (child) (mental) (physical) (sexual) X58

Accident (to) X58

- aircraft (in transit) (powered) —see also Accident, transport, aircraft
- - due to, caused by cataclysm —see Forces of nature, by type
- animal-rider —see Accident, transport, animal-rider
- animal-drawn vehicle —see Accident, transport, animal-drawn vehicle occupant
- automobile —see Accident, transport, car occupant
- bare foot water skier V94.4
- boat, boating —see also Accident, watercraft
 - - striking swimmer
 - - - powered V94.11
 - - - unpowered V94.12
- bus —see Accident, transport, bus occupant
- cable car, not on rails V98.0
- - on rails —see Accident, transport, streetcar occupant
- car —see Accident, transport, car occupant
- caused by, due to
 - - animal NEC W64



Tabular List of Diseases and Injuries

Chapter 1

Certain infectious and parasitic diseases (A00-B99)

Includes: diseases generally recognized as communicable or transmissible

Use additional code to identify resistance to antimicrobial drugs (Z16-)

Excludes1: certain localized infections - see body system-related chapters
infectious and parasitic diseases complicating pregnancy, childbirth and the puerperium (O98.-)
influenza and other acute respiratory infections (J00-J22)

Excludes2: carrier or suspected carrier of infectious disease (Z22.-)
infectious and parasitic diseases specific to the perinatal period (P35-P39)

This chapter contains the following blocks:

A00-A09	<u>Intestinal infectious diseases</u>
A15-A19	<u>Tuberculosis</u>
A20-A28	<u>Certain zoonotic bacterial diseases</u>
A30-A49	<u>Other bacterial diseases</u>
A50-A64	<u>Infections with a predominantly sexual mode of transmission</u>
A65-A69	<u>Other spirochetal diseases</u>
A70-A74	<u>Other diseases caused by chlamydiae</u>
A75-A79	<u>Rickettsioses</u>
A80-A89	<u>Viral and prion infections of the central nervous system</u>
A90-A99	<u>Arthropod-borne viral fevers and viral hemorrhagic fevers</u>
B00-B09	<u>Viral infections characterized by skin and mucous membrane lesions</u>
B10	<u>Other human herpesviruses</u>
B15-B19	<u>Viral hepatitis</u>
B20	<u>Human immunodeficiency virus [HIV] disease</u>
B25-B34	<u>Other viral diseases</u>
B35-B49	<u>Mycoses</u>
B50-B64	<u>Protozoal diseases</u>
B65-B83	<u>Helminthiases</u>
B85-B89	<u>Pediculosis, acariasis and other infestations</u>
B90-B94	<u>Sequelae of infectious and parasitic diseases</u>
B95-B97	<u>Bacterial and viral infectious agents</u>
B99	<u>Other infectious diseases</u>

Intestinal infectious diseases (A00-A09)

A00 Cholera



Tabular List of Diseases and Injuries

Intestinal infectious diseases (A00-A09)

A00 Cholera

A00.0 Cholera due to *Vibrio cholerae* 01, biovar cholerae
Classical cholera

A00.1 Cholera due to *Vibrio cholerae* 01, biovar eltor
Cholera eltor

A00.9 Cholera, unspecified

A01 Typhoid and paratyphoid fevers

A01.0 Typhoid fever
Infection due to *Salmonella typhi*

A01.00 Typhoid fever, unspecified

A01.01 Typhoid meningitis

A01.02 Typhoid fever with heart involvement
Typhoid endocarditis
Typhoid myocarditis

A01.03 Typhoid pneumonia

A01.04 Typhoid arthritis



Format Structure of ICD-10-CM

ICD-10-CM							
Alpha	#	Alpha or #	•	Alpha or #	Alpha or #	Alpha or #	Alpha or #
Category				Etiology, Anatomic site, Severity (possibly dummy placeholder)			Extension





Extensions

- Code extensions (7th character) have been added to specify:
 - Episode of care for injuries and external causes of injuries
 - S94.11xA – Injury of medial plantar nerve, right leg, initial encounter
 - Fetus number in obstetrics
 - O36.0131 – Maternal care for anti-D(Rh) antibodies, third trimester, fetus 1
- Below are a few limited examples:
 - to identify the encounter type
 - A Initial Encounter
 - D Subsequent Encounter
 - S Sequelae
 - to provide further specificity about the condition being coded
 - A Initial Encounter for closed fracture
 - K Subsequent encounter for fracture with nonunion
 - for single and multiple gestations, to identify the fetus
 - 0 Not applicable (single gestation) or unspecified
 - 1 fetus 1
 - 9 Other fetus
- The extension may be a number or letter and must always be the 7th character



Extensions

Abuse

- adult —see Maltreatment, adult
- child —see Maltreatment, child

Maltreatment

- adult
- child
 - - abandonment
 - - - confirmed T74.02
 - - - suspected T76.02
 - - - confirmed T74.92
 - - - history of —see History, personal (of), abuse
 - - - neglect
 - - - - confirmed T74.02
 - - - - history of —see History, personal (of), abuse
 - - - - suspected T76.02
 - - - physical abuse
 - - - - confirmed T74.12
 - - - - history of —see History, personal (of), abuse
 - - - - suspected T76.12

T76 Adult and child abuse, neglect and other maltreatment, suspected

Use **additional** code, if applicable, to identify any associated current injury

Excludes1: adult and child maltreatment, confirmed (T74.-)
suspected abuse and maltreatment in pregnancy (O9A.3-, O9A.4-, O9A.5-)
suspected adult physical abuse, ruled out (Z04.71)
suspected adult sexual abuse, ruled out (Z04.41)
suspected child physical abuse, ruled out (Z04.72)
suspected child sexual abuse, ruled out (Z04.42)

The appropriate 7th character is to be added to each code from category T76

- A - initial encounter
- D - subsequent encounter
- S - sequela

T76.0 Neglect or abandonment, suspected

T76.01 Adult neglect or abandonment, suspected

T76.02 Child neglect or abandonment, suspected

T76.1 Physical abuse, suspected

T76.11 Adult physical abuse, suspected

T76.12 Child physical abuse, suspected



Placeholders

- Dummy Placeholders are necessary to ensure the accuracy of certain codes
- Dummy Placeholders are always the letter 'x' or 'X'
 - Can be upper or lower case
- Dummy Placeholders have 2 uses
 - When a code has less than 6 characters and a 7th character extension is required ~ the 'x' is assigned for all characters less than 6
 - T76.12xA Child physical abuse, suspected, **initial encounter**
 - 5th character for certain 6 character codes thus providing for future expansion
 - M53.2x7 Spinal instabilities, lumbosacral region



Added Features to ICD-10-CM

- ICD-10-CM reflects updated terminology and modern medicine
- ICD-10-CM includes codes for laterality in chapters where laterality is deemed important
 - If a **bilateral** code is not provided and the condition is bilateral, code both left and right side
 - H50.411 Cyclotropia, right eye
 - H50.412 Cyclotropia, left eye
 - There is no code for bilateral
 - When laterality is not **documented**, there is always an unspecified code
 - H47.619 Cortical blindness, unspecified side of brain
 - When a condition is bilateral but there are no distinct codes identifying laterality, use the valid code only once
 - N28.1 – Cyst of kidney, acquired



Added Features to ICD-10-CM

ICD-10-CM codes are more specific

- Manifestations of diseases may be included in a single code
 - **ICD-9-CM:** 250.63 Diabetes with neurological manifestations, juvenile type, uncontrolled; 536.3 Gastroparesis
 - **ICD-10-CM:** E10.43 Type 1 diabetes mellitus with diabetic gastroparesis
- Greater specificity will provide
 - Better statistical data for nosologists, epidemiologists and researchers to track and study disease in the US
 - Claim rejections should be reduced
- Clinical documentation will need to improve in order to code to the highest level of specificity
 - Q90.9 Down syndrome, unspecified
 - Q90.0 Trisomy 21, mosaicism (mitotic nondisjunction)
- Greater flexibility for expansion when new codes are needed



Added Features to ICD-10-CM

- Example of the impact of adding anatomic site and laterality

ICD-9-CM	ICD-10-CM
373.2 Chalazion Meibomian (gland) cyst <i>Excludes: infected meibomian gland (373.12)</i>	H00.1 Chalazion Meibomian (gland) cyst <i>Excludes2: Infected Meibomian gland (H00.02-)</i>
	H00.11 Chalazion right upper eyelid
	H00.12 Chalazion right lower eyelid
	H00.13 Chalazion right eye, unspecified eyelid
	H00.14 Chalazion left upper eyelid
	H00.15 Chalazion left lower eyelid
	H00.16 Chalazion left eye, unspecified eyelid
	H00.19 Chalazion unspecified eye, unspecified eyelid



Added Features to ICD-10-CM

ICD-10-CM includes full code titles for all codes

- No referencing back to common 4th and 5th digits
- ICD-9-CM
 - 756 = Other congenital musculoskeletal anomalies
 - 756.1 = Anomalies of spine
 - 756.19 = Other
- ICD-10-CM
 - Q76 = Congenital malformation of spine and bony thorax
 - Q76.4 = Other congenital malformations of spine, not associated with scoliosis
 - Q76.41 = Congenital kyphosis
 - Q76.411 = Congenital kyphosis, occipito-atlanto-axial region



Added Features to ICD-10-CM

- Consists of 21 Chapters compared to 17 in ICD-9-CM
 - Sense organs are no longer in the nervous system disorders – they have their own Chapters
 - Diseases of the Eye and Adnexa (Chapter 7)
 - Diseases of the Ear and Mastoid Process (Chapter 8)
 - V and E codes are no longer supplemental classifications ~ They have their own Chapters
 - E codes are now in Chapters 19 and 20
 - Injury, poisoning and certain other consequences of external causes (Chapter 19)
 - » T42.5x1 **Poisoning** by mixed antiepileptics, **accidental (unintentional)**
 - External causes of morbidity (Chapter 20)
 - » Y79.1 Therapeutic (nonsurgical) and rehabilitative orthopedic devices associated with adverse incidents
 - V codes are now in Chapter 21: Factors influencing health status and contact with health services



Added Features to ICD-10-CM (GEMs)

- National Center for Health Statistics has developed Diagnosis Code Set General Equivalence Mappings (GEMs)
 - Reference mapping that attempts to include all valid relationships between the codes in the ICD-9- CM diagnosis classification and the ICD-10-CM diagnosis classification
 - Bi-directional mappings are available (i.e., 9 to 10 and 10 to 9)
 - <http://www.cms.gov/Medicare/Coding/ICD10/index.html?redirect=/ICD10/>
 - <http://www.cdc.gov/nchs/icd/icd10cm.htm>
 - Automated tool developed by AAPC (access available on DPH ICD-10 website under Training)



Added Features to ICD-10-CM (GEMs)

ICD-9-CM >	ICD-10-CM	ICD-10-CM >	ICD-9-CM
756.52 Osteopetrosis	Q78.2 Osteopetrosis	Q78.2 Osteopetrosis	756.52 Osteopetrosis
250.13 Diabetes with ketoacidosis, type I [juvenile type], uncontrolled	E10.10 Type 1 diabetes mellitus with ketoacidosis without coma OR	E10.10 Type 1 diabetes mellitus with ketoacidosis without coma	250.11 Diabetes with ketoacidosis, type I [juvenile type], not stated as uncontrolled
	E10.65 Type 1 diabetes mellitus with hyperglycemia	E10.65 Type 1 diabetes mellitus with hyperglycemia	250.81 Diabetes with other specified manifestations, type I [juvenile type], not stated as uncontrolled
		T45.4X6D Underdosing of iron and its compounds, subsequent encounter	No Equivalent Diagnosis Code since Underdosing was not included in ICD-9-CM



Added Features to ICD-10-CM (GEMs)

- Appropriate uses of GEMS
 - When conversion of diagnostic data is going to be done
 - When translating lists of codes for non-clinical purposes
 - For research purposes when trend analysis is needed
- Inappropriate uses of GEMS
 - **Never** use GEMs to crosswalk a diagnosis included in clinical documentation from ICD-9-CM to ICD-10-CM
 - For example, a client with a chronic condition was seen prior to the ICD-10-CM compliance date and an ICD-9-CM diagnosis code is assigned. The client returns for the same condition after the ICD-10-CM compliance date.
 - How should the **correct** ICD-10-CM diagnosis code at the highest level of specificity be determined??



Similarities Between 9 and 10 Alphabetic Index

- Alphabetic Index and Tabular List
 - Structured the same as ICD-9-CM

Encounter (with health service) (for) Z76.89

- adjustment and management (of)
- breast implant Z45.81
- implanted device NEC Z45.89
- myringotomy device (stent) (tube) Z45.82
- administrative purpose only Z02.9
- examination for
- adoption Z02.82
- armed forces Z02.3
- disability determination Z02.71
- driving license Z02.4
- employment Z02.1
- insurance Z02.6
- medical certificate NEC Z02.79
- paternity testing Z02.81
- residential institution admission Z02.2
- school admission Z02.0
- sports Z02.5
- specified reason NEC Z02.89
- aftercare —see Aftercare

Hydrocephalus (acquired) (external) (internal) (malignant) (recurrent) G91.9

- aqueduct Sylvius stricture Q03.0
- causing disproportion O33.6
- with obstructed labor O66.3
- communicating G91.0
- congenital (external) (internal) Q03.9
- with spina bifida Q05.4
- cervical Q05.0
- dorsal Q05.1
- lumbar Q05.2
- lumbosacral Q05.2



Similarities Between 9 and 10 Alphabetic Index

- Many convention types have same meaning in the Tabular List and Alphabetic Index:
 - Instructional notes
 - Abbreviations and Symbols
 - Punctuation marks
- Alphabetic index includes suggestions for manifestation codes

Hydrocephalus (acquired) (external) (internal) (malignant) (recurrent) G91.9

- aqueduct Sylvius stricture Q03.0

- causing disproportion O33.6

- - with obstructed labor O66.3

- communicating G91.0

- congenital (external) (internal) Q03.9

- in (due to)

- - infectious disease NEC B89 [G91.4]

- - neoplastic disease NEC (see also Neoplasm) G91.4

- - parasitic disease B89 [G91.4]

- newborn Q03.9

- - with spina bifida —see Spina bifida, with hydrocephalus



Similarities Between 9 and 10

Comparison of 9 and 10 Chapters

ICD-9-CM Chapter	ICD-9-CM Description	ICD-10-CM Chapter	ICD-10-CM Description
Chapter 3 (240 ~ 279)	Endocrine, Nutritional and Metabolic Diseases	Chapter 4 (E00 ~ E89)	Endocrine, Nutritional and Metabolic Diseases
Chapter 5 (290 – 319)	Mental Disorders	Chapter 5 (F01 – F99)	Mental and Behavioral Disorders
Chapter 6 (320-389)	Nervous System and Sense Organs	Chapter 6 (G00 – G99)	Diseases of the Nervous System
		Chapter 7 (H00 – H59)	Diseases of the Eye and Adnexa
		Chapter 8 (H60 – H95)	Diseases of the Ear and Mastoid Process
Chapter 7 (390 – 459.9)	Circulatory System	Chapter 9 (I00 – I99)	Diseases of the Circulatory System



Similarities Between 9 and 10 Chapters of ICD-10-CM

Table of Contents

- 1 [Certain infectious and parasitic diseases \(A00-B99\)](#)
- 2 [Neoplasms \(C00-D49\)](#)
- 3 [Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism \(D50-D89\)](#)
- 4 [Endocrine, nutritional and metabolic diseases \(E00-E89\)](#)
- 5 [Mental, Behavioral and Neurodevelopmental disorders \(F01-F99\)](#)
- 6 [Diseases of the nervous system \(G00-G99\)](#)
- 7 [Diseases of the eye and adnexa \(H00-H59\)](#)
- 8 [Diseases of the ear and mastoid process \(H60-H95\)](#)
- 9 [Diseases of the circulatory system \(I00-I99\)](#)
- 10 [Diseases of the respiratory system \(J00-J99\)](#)
- 11 [Diseases of the digestive system \(K00-K95\)](#)
- 12 [Diseases of the skin and subcutaneous tissue \(L00-L99\)](#)
- 13 [Diseases of the musculoskeletal system and connective tissue \(M00-M99\)](#)
- 14 [Diseases of the genitourinary system \(N00-N99\)](#)
- 15 [Pregnancy, childbirth and the puerperium \(O00-O9A\)](#)
- 16 [Certain conditions originating in the perinatal period \(P00-P96\)](#)
- 17 [Congenital malformations, deformations and chromosomal abnormalities \(Q00-Q99\)](#)
- 18 [Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified \(R00-R99\)](#)
- 19 [Injury, poisoning and certain other consequences of external causes \(S00-T88\)](#)
- 20 [External causes of morbidity \(V00-Y99\)](#)
- 21 [Factors influencing health status and contact with health services \(Z00-Z99\)](#)



Similarities Between 9 and 10 Tabular List

- Tabular List Example ~ Chapter

Chapter 16

Certain conditions originating in the perinatal period (P00-P96)

Note: Codes from this chapter are for use on newborn records only, never on maternal records

Includes: conditions that have their origin in the fetal or perinatal period (before birth through the first 28 days after birth) even if morbidity occurs later

Excludes2: congenital malformations, deformations and chromosomal abnormalities (Q00-Q99)
endocrine, nutritional and metabolic diseases (E00-E88)
injury, poisoning and certain other consequences of external causes (S00-T88)
neoplasms (C00-D49)
tetanus neonatorum (A33)



Similarities Between 9 and 10 Tabular List

- Tabular List Example – Chapter 16 (cont'd)
 - Each chapter in the Tabular List begins with a summary of code blocks

This chapter contains the following blocks:

P00-P04	<u>Newborn affected by maternal factors and by complications of pregnancy, labor, and delivery</u>
P05-P08	<u>Disorders of newborn related to length of gestation and fetal growth</u>
P09	<u>Abnormal findings on neonatal screening</u>
P10-P15	<u>Birth trauma</u>
P19-P29	<u>Respiratory and cardiovascular disorders specific to the perinatal period</u>
P35-P39	<u>Infections specific to the perinatal period</u>
P50-P61	<u>Hemorrhagic and hematological disorders of newborn</u>
P70-P74	<u>Transitory endocrine and metabolic disorders specific to newborn</u>
P76-P78	<u>Digestive system disorders of newborn</u>
P80-P83	<u>Conditions involving the integument and temperature regulation of newborn</u>
P84	<u>Other problems with newborn</u>
P90-P96	<u>Other disorders originating in the perinatal period</u>



Similarities Between 9 and 10 Tabular List

- Tabular List Example – Blocks of Codes

Infections specific to the perinatal period (P35-P39)

Infections acquired in utero, during birth via the umbilicus, or during the first 28 days after birth

Excludes2: asymptomatic human immunodeficiency virus [HIV] infection status (Z21)

congenital gonococcal infection (A54.-)

congenital pneumonia (P23.-)

congenital syphilis (A50.-)

human immunodeficiency virus [HIV] disease (B20)

infant botulism (A48.51)

infectious diseases not specific to the perinatal period (A00-B99, J09, J10.-)

intestinal infectious disease (A00-A09)

laboratory evidence of human immunodeficiency virus [HIV] (R75)

tetanus neonatorum (A33)

P35 Congenital viral diseases

Includes: infections acquired in utero or during birth

P35.0 Congenital rubella syndrome

Congenital rubella pneumonitis

P35.1 Congenital cytomegalovirus infection



ICD-10-CM Official Guidelines for Coding and Reporting

- A set of rules developed by the National Center for Health Statistics (NCHS) that accompany and complement the official conventions and instructions provided within the ICD-10-CM
 - The instructions and conventions of the classification take precedence over the guidelines
 - HIPAA requires adherence to the official coding guidelines in all healthcare settings
- Sections 1 and 4 of the guidelines apply to outpatients
- Updates are published at least annually
 - http://www.cdc.gov/nchs/data/icd9/icd10cm_guidelines_2014.pdf



Instructional Notes Includes

- “Includes” – In Tabular List, defines and/or gives examples of the content of a **chapter, section, category, or block of category codes (subcategory)**
 - Includes list is not exhaustive so even though a documented diagnosis is not on the list, the code may still be appropriate

E10 Type 1 diabetes mellitus

Includes: brittle diabetes (mellitus)

diabetes (mellitus) due to autoimmune process

diabetes (mellitus) due to immune mediated pancreatic islet beta-cell destruction

idiopathic diabetes (mellitus)

juvenile onset diabetes (mellitus)

ketosis-prone diabetes (mellitus)

E10.1 Type 1 diabetes mellitus with ketoacidosis

E10.10 Type 1 diabetes mellitus with ketoacidosis without coma

E10.11 Type 1 diabetes mellitus with ketoacidosis with coma



Instructional Notes Includes

- At the **code level**, there may be a list of terms included in the code but the term “includes” is not used
- Example

E10.2 Type 1 diabetes mellitus with kidney complications

E10.21 Type 1 diabetes mellitus with diabetic nephropathy

Type 1 diabetes mellitus with intercapillary glomerulosclerosis

Type 1 diabetes mellitus with intracapillary glomerulonephrosis

Type 1 diabetes mellitus with Kimmelstiel-Wilson disease

E10.22 Type 1 diabetes mellitus with diabetic chronic kidney disease

Type 1 diabetes mellitus with chronic kidney disease due to conditions classified to .21 and .22

Use **additional** code to identify stage of chronic kidney disease (N18.1-N18.6)

E10.29 Type 1 diabetes mellitus with other diabetic kidney complication

Type 1 diabetes mellitus with renal tubular degeneration



Instructional Notes

Excludes1

- Excludes1 note
 - Indicates that the code(s) excluded should never be used at the same time as the code above the “Excludes1” note ~ the 2 conditions cannot occur together
 - In other words: **NOT CODED HERE**
 - Example:

E10 Type 1 diabetes mellitus

Excludes1: diabetes mellitus due to underlying condition (E08.-)
drug or chemical induced diabetes mellitus (E09.-)
gestational diabetes (O24.4-)
hyperglycemia NOS (R73.9)
neonatal diabetes mellitus (P70.2)
postpancreatectomy diabetes mellitus (E13.-)
postprocedural diabetes mellitus (E13.-)
secondary diabetes mellitus NEC (E13.-)
type 2 diabetes mellitus (E11.-)



Instructional Notes

Excludes2

- Excludes2 note
 - Indicates that the condition excluded is not part of the condition represented by the code, but a client may have both conditions at the same time
 - In other words: **NOT INCLUDED HERE**

Q28 Other congenital malformations of circulatory system

Excludes1: congenital aneurysm NOS (Q27.8)
congenital coronary aneurysm (Q24.5)
ruptured cerebral arteriovenous malformation (I60.8)
ruptured malformation of precerebral vessels (I72.0)

Excludes2: congenital peripheral aneurysm (Q27.8)
congenital pulmonary aneurysm (Q25.79)
congenital retinal aneurysm (Q14.1)

Q28.0 Arteriovenous malformation of precerebral vessels

Congenital arteriovenous precerebral aneurysm (nonruptured)

Q28.1 Other malformations of precerebral vessels

Congenital malformation of precerebral vessels NOS

Congenital precerebral aneurysm (nonruptured)



Instructional Notes

Excludes Notes ~ Question

Q68 Other congenital musculoskeletal deformities

Excludes1: reduction defects of limb(s) (Q71-Q73)

Excludes2: congenital myotonic chondrodystrophy (G71.13)

Q68.0 Congenital deformity of sternocleidomastoid muscle

Congenital contracture of sternocleidomastoid (muscle)

Congenital (sternomastoid) torticollis

Sternomastoid tumor (congenital)

Q68.1 Congenital deformity of finger(s) and hand

Congenital clubfinger

Spade-like hand (congenital)

- Question 1: Could you code Q71.62, “Lobster-claw, left hand” (which falls within the range of Q71-Q73) and “Congenital torticollis” (Q68.0) for same encounter?
- Question 2: Could you code both “Congenital torticollis” and “Congenital myotonic chondrodystrophy” (G71.13) for same encounter?



Instructional Notes

“See” Notes

- Cross reference notes are “See”, “See also”, “See condition”
- “See” – instructs you to look elsewhere
- “See also” – there is another place to look if the code is not listed here

Pain (s) (see also Painful) R52

- abdominal R10.9
- colic R10.83
- generalized R10.84
- with acute abdomen R10.0
- lower R10.30
- left quadrant R10.32
- pelvic or perineal R10.2
- periumbilical R10.33
- right quadrant R10.31
- rebound —see Tenderness, abdominal, rebound
- severe with abdominal rigidity R10.0
- tenderness —see Tenderness, abdominal
- upper R10.10
- epigastric R10.13
- left quadrant R10.12
- right quadrant R10.11
- acute R52

Tenderness, abdominal R10.819

- epigastric R10.816
- generalized R10.817
- left lower quadrant R10.814
- left upper quadrant R10.812
- periumbilic R10.815
- right lower quadrant R10.813
- right upper quadrant R10.811
- rebound R10.829
- epigastric R10.826
- generalized R10.827
- left lower quadrant R10.824
- left upper quadrant R10.822
- periumbilic R10.825
- right lower quadrant R10.823
- right upper quadrant R10.821

R10.8 Other abdominal pain

R10.81 Abdominal tenderness

Abdominal tenderness NOS

R10.811 Right upper quadrant abdominal tenderness

R10.812 Left upper quadrant abdominal tenderness

R10.813 Right lower quadrant abdominal tenderness

R10.814 Left lower quadrant abdominal tenderness

R10.815 Periumbilic abdominal tenderness

R10.816 Epigastric abdominal tenderness

R10.817 Generalized abdominal tenderness

R10.819 Abdominal tenderness, unspecified site

R10.82 Rebound abdominal tenderness

R10.821 Right upper quadrant rebound abdominal tenderness



Instructional Notes

“See” Notes

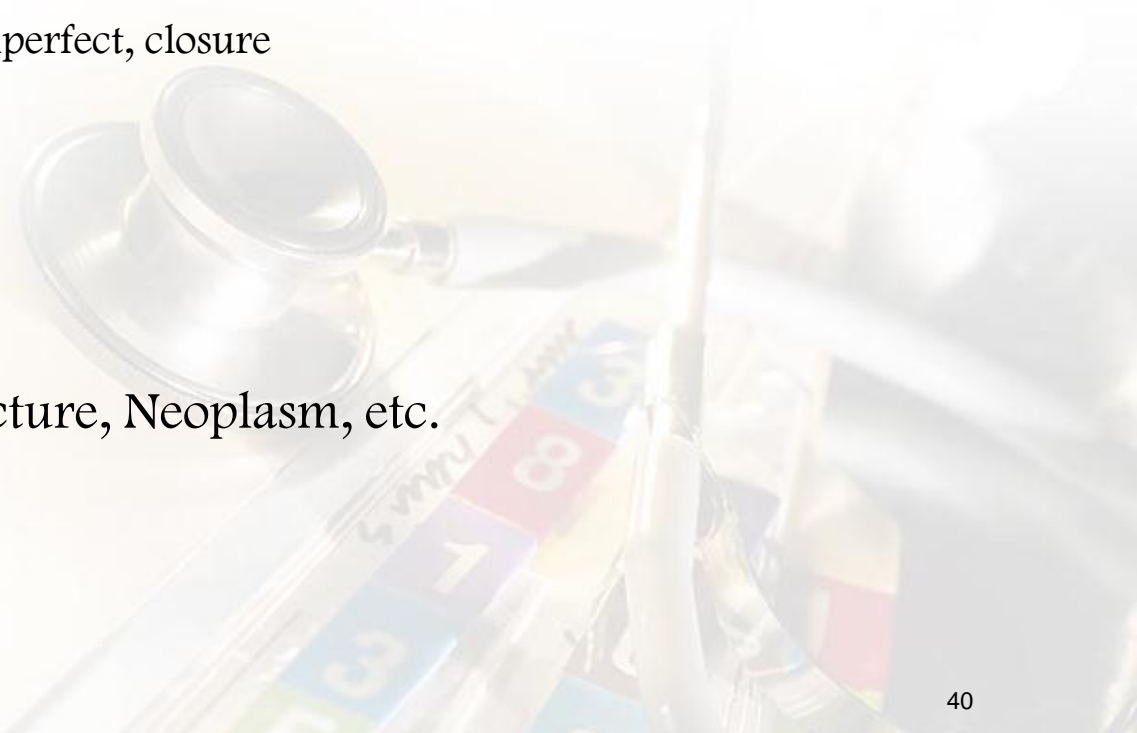
- “See condition” – means the term used to look up the diagnosis is not appropriate to identify the code
 - Example from Alphabetic Index

Femur, femoral — *see condition*

Fenestration, fenestrated — *see also* Imperfect, closure

- ~ aortico-pulmonary Q21.4
- ~ cusps, heart valve NEC Q24.8
- ~ ~ pulmonary Q22.3
- ~ pulmonic cusps Q22.3

- Condition could be Fracture, Neoplasm, etc.





Instructional Notes

“Code” Notes

- “Code First” – select a code to:
 - represent the etiology that caused the manifestation and sequence that 1st
 - provide coding sequence guidance

Hydrocephalus (acquired) (external) (internal) (malignant) (recurrent) G91.9

- aqueduct Sylvius stricture Q03.0
- causing disproportion O33.6
- - with obstructed labor O66.3
- communicating G91.0
- congenital (external) (internal) Q03.9
- in (due to)
 - - infectious disease NEC B89 [G91.4]
 - - neoplastic disease NEC (see also Neoplasm) G91.4
 - - parasitic disease B89 [G91.4]
- newborn Q03.9
- - with spina bifida —see Spina bifida, with hydrocephalus

G91 Hydrocephalus

Includes: acquired hydrocephalus

Excludes1: Arnold-Chiari syndrome with hydrocephalus (Q07.-)
congenital hydrocephalus (Q03.-)
spina bifida with hydrocephalus (Q05.-)

G91.0 Communicating hydrocephalus

Secondary normal pressure hydrocephalus

G91.1 Obstructive hydrocephalus

G91.2 (Idiopathic) normal pressure hydrocephalus

Normal pressure hydrocephalus NOS

G91.3 Post-traumatic hydrocephalus, unspecified

G91.4 Hydrocephalus in diseases classified elsewhere

Code first underlying condition, such as:
congenital syphilis (A50.4-)
neoplasm (C00-D49)

Excludes1: hydrocephalus due to congenital toxoplasmosis (P37.1)

G91.8 Other hydrocephalus

G91.9 Hydrocephalus, unspecified



Instructional Notes

“Code” Notes

- “Use Additional Code” – assign an additional secondary code
 - to identify the manifestation due to the underlying etiology
 - to provide coding sequencing guidance

Human immunodeficiency virus [HIV] disease (B20)

B20 Human immunodeficiency virus [HIV] disease

Includes: acquired immune deficiency syndrome [AIDS]
AIDS-related complex [ARC]
HIV infection, symptomatic

Code first Human immunodeficiency virus [HIV] disease complicating pregnancy, childbirth and the puerperium, if applicable (O98.7-)

Use additional code(s) to identify all manifestations of HIV infection

Excludes1: asymptomatic human immunodeficiency virus [HIV] infection status (Z21)
exposure to HIV virus (Z20.6)
inconclusive serologic evidence of HIV (R75)



Abbreviations

- **NEC – Not Elsewhere Classifiable**
 - Other types of specified conditions not classified anywhere else in ICD-10-CM
 - Alphabetic Index uses NEC in code descriptions to direct the coder to the Tabular List showing a ‘not elsewhere classified’ code description

Malformation (congenital) —see also Anomaly

- adrenal gland Q89.1
- affecting multiple systems with skeletal changes NEC Q87.5
- alimentary tract Q45.9
 - - specified type NEC Q45.8
 - - upper Q40.9
 - - - specified type NEC Q40.8
- aorta Q25.9
 - - atresia Q25.2
 - - coarctation (preductal) (postductal) Q25.1
 - - patent ductus arteriosus Q25.0
 - - specified type NEC Q25.4
 - - stenosis (supravalvular) Q25.3
- aortic valve Q23.9
 - - specified NEC Q23.8
- arteriovenous, aneurysmatic (congenital) Q27.30

Q23 Congenital malformations of aortic and mitral valves

Q23.0 Congenital stenosis of aortic valve

- Congenital aortic atresia
- Congenital aortic stenosis NOS

Excludes1: congenital stenosis of aortic valve in hypoplastic left heart syndrome (Q23.4)
congenital subaortic stenosis (Q24.4)
supravalvular aortic stenosis (congenital) (Q25.3)

Q23.1 Congenital insufficiency of aortic valve

- Bicuspid aortic valve
- Congenital aortic insufficiency

Q23.2 Congenital mitral stenosis

- Congenital mitral atresia

Q23.3 Congenital mitral insufficiency

Q23.4 Hypoplastic left heart syndrome

Q23.8 Other congenital malformations of aortic and mitral valves

Q23.9 Congenital malformation of aortic and mitral valves, unspecified



Abbreviations

- NOS – Not Otherwise Specified
 - Used in Alphabetic Index and Tabular List when clinical documentation is insufficient to assign a more specific code
 - Equivalent of “Unspecified”

Pain (s) (see also Painful) R52

- gastric —see Pain, abdominal
- generalized NOS R52
- genital organ
 - - female N94.89
 - - male N50.8
- groin —see Pain, abdominal, lower
- hand —see Pain, limb, upper
- head —see Headache

R52 Pain, unspecified

Acute pain NOS
Generalized pain NOS
Pain NOS

Excludes1: acute and chronic pain, not elsewhere classified (G89.-)
localized pain, unspecified type - code to pain by site, such as:
abdomen pain (R10.-)
back pain (M54.9)
breast pain (N64.4)
chest pain (R07.1-R07.9)
ear pain (H92.0-)
eye pain (H57.1)
headache (R51)
joint pain (M25.5-)
limb pain (M79.6-)
lumbar region pain (M54.5)
pelvic and perineal pain (R10.2)
shoulder pain (M25.51-)
spine pain (M54.-)
throat pain (R07.0)
tongue pain (K14.6)
tooth pain (K08.8)
renal colic (N23)
pain disorders exclusively related to psychological factors (F45.41)

R53 Malaise and fatigue

R53.0 Neoplastic (malignant) related fatigue



Symbols and Punctuation Marks

- Point Dash symbol ☞ .~
 - In the Alphabetical Index and Tabular List, used to indicate a code is incomplete
Membranacea placenta O43.19~
- Comma ☞ ,
 - Separate synonyms or essential modifiers follow the comma
Meningococcus, meningococcal (*see also* condition) A39.9
~ adrenalitis, hemorrhagic A39.1
- Parentheses ☞ () – used in Alphabetical Index and Tabular List
 - Placed around supplementary words that may be present or absent in the disease statement in the clinical documentation
 - These terms are known as *nonessential modifiers*
 - Nonessential modifiers do not affect code assignment
 - In tabular, used when codes are included
 - Diabetes, diabetic (mellitus) (sugar) E11.9
 - E11 Type 2 diabetes mellitus
Use additional code to identify any insulin use (Z79.4)



Punctuation Marks

- **Brackets []** ~ used in Alphabetic Index and Tabular List
 - Alphabetic Index ~ identify manifestation codes

Parkinsonism (idiopathic) (primary) G20
- with neurogenic orthostatic hypotension (symptomatic) G90.3
- arteriosclerotic G21.4
- dementia G31.83 [F02.80]
- - with behavioral disturbance G31.83 [F02.81]
 - Tabular List ~ enclose synonyms, alternative wordings, or explanatory phrases

B06 Rubella [German measles]

- **Colon :** ~ used in Tabular List
 - Used with “Includes”, “Excludes”, “Note” or after an incomplete term that needs one or more of the modifiers following the colon to make it assignable to a given category

A85 Other viral encephalitis, not elsewhere classified

Includes: specified viral encephalomyelitis NEC
specified viral meningoencephalitis NEC

Excludes1: benign myalgic encephalomyelitis (G93.3)
encephalitis due to:
cytomegalovirus (B25.8)
herpesvirus NEC (B10.0-)



Relational Terms

- “and” ~ when used within a code title in Tabular List, means “and/or”
- M24.87 Other specific joint derangements of ankle **and** foot, not elsewhere classified
- M24.871 Other specific joint derangements of right **ankle**, not elsewhere classified
 - M24.872 Other specific joint derangements of left **ankle**, not elsewhere classified
 - M24.873 Other specific joint derangements of unspecified **ankle**, not elsewhere classified
 - M24.874 Other specific joint derangements of right **foot**, not elsewhere classified
 - M24.875 Other specific joint derangements left **foot**, not elsewhere classified
 - M24.876 Other specific joint derangements of unspecified **foot**, not elsewhere classified



Relational Terms

- “with” ~ means “associated with” or “due to”
 - Alphabetical Index ~Used in code titles; sequenced immediately following the main term (not in alphabetical order)

Obesity E66.9

- with alveolar hyperventilation E66.2
- adrenal E27.8
- complicating
 - - childbirth O99.214
 - - pregnancy O99.21-
 - - puerperium O99.215
- constitutional E66.8

- Tabular List ~ Used in instructional notes

L71 Rosacea

Use additional code for adverse effect, if applicable, to identify drug (T36-T50 with fifth or sixth character 5)

L71.0 Perioral dermatitis

L71.1 Rhinophyma

L71.8 Other rosacea

L71.9 Rosacea, unspecified



Other Coding Guidelines

Default Codes

Default code – In the Alphabetic Index, a code listed next to a main term

- Condition most commonly associated with the main term; or
- Unspecified code for the condition

Trigger finger (acquired) M65.30

- congenital Q74.0

- Index finger M65.32-

- little finger M65.35-

- middle finger M65.33-

- ring finger M65.34-

- thumb M65.31-





Other Coding Guidelines

Combination Codes

- Combination Codes are single codes used to classify:
 - Two diagnoses
 - J35.03 Chronic tonsillitis and adenoiditis
 - Diagnosis with associated secondary process (manifestation)
 - P24.31 Neonatal aspiration of milk and regurgitated food **with** respiratory symptoms
 - Diagnosis with associated complication
 - Q05.2 Lumbar spina bifida with hydrocephalus
- Combination codes are identified by:
 - Subterm entries in Alphabetic Index
 - Instructional notes in the Tabular List
- Multiple coding should not be used when the classification provides a combination code that clearly identifies all of the elements documented in the diagnosis
- When the combination code lacks necessary specificity in describing the manifestation or complication, an additional code should be used as a secondary code



Other Coding Guidelines

First Listed Codes

- Golden Rule: List first the code for the diagnosis, condition, problem, or other reason for encounter shown in the client record to be chiefly responsible for the services provided
 - In some cases the first-listed diagnosis may be a symptom when a diagnosis has not been established/confirmed by the clinician
- List additional codes that describe any coexisting condition
 - Code all documented conditions that coexist at the time of the encounter and require or affect the client's treatment or management
 - Do not code conditions that were previously treated but no longer exist
- *9-month old male presents with a rash that started on the stomach and has spread to arms and legs. The child has a low grade fever and mother reports loss of appetite. The child was born with a cleft palate that has been repaired.*



Other Coding Guidelines


Diagnosis Not Established

- If the diagnosis documented for the encounter is qualified as “probable”, “suspected”, “likely”, “questionable”, “possible”, or “still to be ruled out”, etc., **DO NOT** code the condition as if it existed or was established
 - Code the condition(s) to the highest degree of certainty for that encounter, such as symptoms, signs, abnormal test results, or other reason for the visit
 - Codes from Chapter 21, Factors Influencing Health Status and Contact with Health Services, are available when there is no disease/injury
 - NOTE: This guideline is different for inpatient settings



Other Coding Guidelines

Borderline Diagnosis

- Borderline conditions are not uncertain diagnoses
 - Borderline diagnoses are coded as confirmed
 - Unless specific classification for borderline
 - Example: Borderline Diabetes (Key word ‘Borderline’)
 - Documentation should support the borderline condition
 - Guideline applies to all healthcare settings
- 



Other Coding Guidelines

Other Codes

- Code all documented conditions that coexist at the time of the encounter/visit, and require or affect patient care treatment or management
 - Chronic diseases treated on an ongoing basis may be coded and reported as many times as the patient receives treatment and care for the condition(s)
 - History codes (categories Z80-Z87) may be used as secondary codes if the historical condition or family history has an impact on current care or influences treatment
 - Signs and symptoms that are associated routinely with a disease process should not be assigned as additional codes, unless otherwise instructed by the classification
 - Signs and symptoms that may not be associated routinely with a disease process should be coded when present



Other Coding Guidelines

Acute and Chronic Conditions

- If the same condition is described as both acute and chronic, and separate subentries exist in the Alphabetic Index at the same indentation level (i.e., a combination code does not exist)
 - code both conditions
 - sequence the acute code first
 - Example:
 - **Failure, failed**
 - ~ renal N19
 - ~ ~ acute N17.9
 - ~ ~ chronic N18.9





Other Coding Guidelines

Sequela (Late Effects)

- **Sequela** is the residual effect (condition produced) after the acute phase of an illness or injury has terminated

M48.5 Collapsed vertebra, not elsewhere classified

Collapsed vertebra NOS

Wedging of vertebra NOS

Excludes1: current injury - see Injury of spine, by body region

fatigue fracture of vertebra (M48.4)

pathological fracture of vertebra due to neoplasm (M84.58)

pathological fracture of vertebra due to other diagnosis (M84.68)

pathological fracture of vertebra due to osteoporosis (M80.-)

pathological fracture NOS (M84.4-)

stress fracture of vertebra (M48.4-)

traumatic fracture of vertebra (S12.-, S22.-, S32.-)

The appropriate 7th character is to be added to each code from subcategory M48.5:

A - initial encounter for fracture

D - subsequent encounter for fracture with routine healing

G - subsequent encounter for fracture with delayed healing

S - sequela of fracture

M48.50 Collapsed vertebra, not elsewhere classified, site unspecified

M48.51 Collapsed vertebra, not elsewhere classified, occipito-atlanto-axial region

M48.52 Collapsed vertebra, not elsewhere classified, cervical region



Other Coding Guidelines

Sequela (Late Effects)

- There is no time limit on when a **sequela** code can be used
- The residual effect may occur early or may occur months or years later
- Two codes are generally required for **sequela**:
 - Condition or nature of the sequela is sequenced first
 - **Sequela** code is sequenced second
- *Client suffered a stroke last week and the residual effect is muscle weakness of the left arm*
M62.81 Muscle weakness (generalized)
I69.398 Other sequelae of cerebral infarction
- *Chronic left ankle instability following Grade III sprain of the calcaneofibular ligament 6 months prior*
M24.272 Disorder of ligament, left ankle
S93.412S Sprain of calcaneofibular ligament of the left ankle, sequela



True/False Quiz

1. The World Health Organization (WHO) version of ICD~10 has not been implemented in the United States
2. All codes in ICD~10~CM include full code titles
3. The 2nd and 3rd characters of a code are always numeric
4. 250.00 is a valid code in ICD~10~CM
5. GEMs are a crosswalk between ICD~9~CM/ICD~10~CM
6. NEC means “not elsewhere coded”
7. Terms that appear in parentheses must appear in the diagnostic statement being coded
8. AnExcludes2 note represents Not Coded Here
9. The point dash (.-) symbol indicates that the code is incomplete



True/False Quiz

10. V and E codes from ICD-9-CM are supplemental classifications in ICD-10-CM
11. For all codes that contain laterality, bilateral is always one of the options
12. A symptom can never be the first-listed diagnosis
13. Instructional notes never appear at the beginning of a Chapter
14. Code extensions are always the 7th character
15. Dummy placeholders are used when you have no clue what character to use
16. Possible and Rule out diagnoses are coded



Coding Steps

1. Locate the main term in the Alphabetic Index
 - For Chest Cold, Look up “Cold” then go down list to find “Chest”
2. Scan the main term entry for any instructional notes
 - “see Bronchitis” so look up “Bronchitis”
3. In the diagnosis being coded, identify any terms that modify the main term
 - Nothing under “Bronchitis J40” relates back to Chest Cold
4. Follow any cross-reference notes
5. Always verify the code in the Tabular List
 - (NOTE: **Never** begin code searches using Tabular List – will lead to coding errors!)
 - Go to J40 in the Tabular
6. Follow any instructional notes
 - Do any of the instructions apply to Chest Cold?
7. Select the code
 - J40 is the correct code



Coding Exercises

Use the Coding Steps to Code the following diagnoses

#	Diagnoses	Answer
1	Speech and language developmental delay disorder due to hearing loss	
2	Unspecified delay in development	
3	Receptive Language Disorder	
4	Delayed Milestones	
5	Lack of Coordination	
6	Down's Syndrome	
7	Autistic Disorder, Active State	
8	1-year old child with Failure to Thrive	
9	Microcephaly	



Questions

????????????????

Submit Questions to:
Sarah.Brooks@dhhs.nc.gov

